



**DEPARTMENT OF HUMAN RESOURCES MANAGEMENT**  
6591 ORANGE DRIVE • DAVIE, FLORIDA 33314-3399 • PHONE: 954-797-1100  
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**CERTIFIED FIREFIGHTER/PARAMEDIC CHECKLIST**

**Applicant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The following items are **required** to be submitted with employment application to determine eligibility for the position of CERTIFIED FIREFIGHTER/PARAMEDIC:

- ☐ Completed **Application for Employment**
- ☐ Copy of **Paramedic Certification**
- ☐ Copy of **Firefighter Certification**
- ☐ Copy of **American Heart Association (A.H.A.) Advanced Life Support (A.L.S.) Card**
- ☐ **Notarized Tobacco Affidavit**
- ☐ **DD214** - Military Discharge Form (if applicable)
- ☐ **Veterans Preference Form** (if applicable)
- ☐ **Driving Profile** (Must include the last seven (7) years or greater and cannot be more than thirty (30) days old. **(No internet copies will be accepted.)** Obtainable from any satellite branch of the Broward County Courthouse.)
- ☐ **Current Physical Ability Test with Time**
- ☐ **EVOC** Certification pursuant to FL Statute 401.281 (Must obtain within six (6) months of employment.)
- ☐ Copy of **Class "E" State of Florida Driver's License**
- ☐ Copy of **Social Security Card**
- ☐ Copy of **Birth Certificate** or completion of **Acknowledgement of Certificate of Naturalization** form (available at Town Hall)
- ☐ Copy of **High School Diploma** or **GED**
- ☐ **Dispositions** (Criminal and/or driving offenses. Obtainable from the Clerk of Courts in the county where offense occurred.)

**Notes:**

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**FOR OFFICE USE ONLY**

Date application received: \_\_\_\_\_  
Date PHQ due: \_\_\_\_\_  
Accepted by: \_\_\_\_\_